

**INDIANA BOARD OF LAW EXAMINERS
SUITE 1070 SOUTH TOWER
115 WEST WASHINGTON STREET
INDIANAPOLIS, INDIANA 46204-3417
(317) 232-2553**

**APPLICATION FOR RENEWAL OF PROFESSIONAL CORPORATION, LIMITED LIABILITY COMPANY
AND LIMITED LIABILITY PARTNERSHIPS**

Application for a renewal of the certificate to operate a Professional Corporation, Limited Liability Company, or Limited Liability Partnership is hereby made and, in support of this application, the Corporation, Company or Partnership **submits the following information:**

Corporation, Company or Partnership Name

Listing of Officers, Directors, Shareholders, Members, Partners, Other Equity Owners, and Lawyer employees. **(Please attach)**

*****A listing of each category should be attached to this Application. A sample is enclosed to demonstrate the format for this listing*****

The Corporation, Company, Partnership hereby certifies that it has duly complied with all provisions of the Indiana Code under which it was organized, the rules of the Indiana Supreme Court, and the regulations of the State Board of Law Examiners.

Dated this _____ day of _____, _____.

President / Partner

STATE OF INDIANA)
) SS:
COUNTY OF _____)

Before me, a Notary Public in and for said County and State, personally appeared

_____ well known to me to be President/Partner of

_____, and who

swore and/or affirmed that the information contained in the above and foregoing Application is

true and correct.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Notarial Seal this

_____ day of _____, 20____.

Notary Public

My Commission Expires:
